

Application Data Sheet

Application Information

Application Type::	Continuation
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	DATA TRANSMISSION ARCHITECTURE FOR SECURE ACCESS TO ENTERPRISE NETWORKS
Attorney Docket Number::	990601C1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	10
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Randy
Family Name::	SALO
City of Residence::	San Diego
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	1441 Yost Drive
City of mailing address::	San Diego
State or Province of mailing address::	CA

Postal or Zip Code of mailing address:: 92109

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Chris
Family Name:: VAN HAMERSVELD
City of Residence:: San Marcos
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 1014 Honeysuckle Drive
City of mailing address:: San Marcos
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 92069

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Barry
Middle Name:: K.
Family Name:: SHELTON
City of Residence:: San Diego
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 12272 Misty Blue Court
City of mailing address:: San Diego
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 92131

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity

Given Name:: Larry
Family Name:: HERBINAUX
City of Residence:: Vista
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 843A Hampton Court
City of mailing address:: Vista
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 92083

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Brian
Middle Name:: D.
Family Name:: DEACON
City of Residence:: Vista
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 1285 Navel Place
City of mailing address:: Vista
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 92084

Correspondence Information

Correspondence Customer Number:: 23696

Representative Information

Representative Customer Number:: 23696

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
Not yet assigned	Continuation	09/438,818	11/10/99